

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	HA	70891	10/1
O.I.P.E. CLASSIFIER		25	10-06-99
FORMALITY REVIEW	J.S.	69134	10-12-99

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	Original
1	10/1
2	10/1
3	10/1
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Claim	Date
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If more than 150 claims or 10 actions  
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